FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	0	Ч	Q	ll	P
q		•	-		1

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response. 16.00

SEC USE ONLY									
Prefix	Serial								
DATE RECEIVED									

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Senior Notes & Equity Offering	PECEIVED CO
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing X Amendment	SEP 2 8 2005
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	185/49
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Waldo's Holdings, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
831 Pearl Street, Boulder, Colorado 80302	(303) 381-2602
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	PROCESS
	gep 3 0 200
Type of Business Organization	
	please specify):
business trust limited partnership, to be formed limited	ed liability company FINANCIA
Month Year	matad
Actual or Estimated Date of Incorporation or Organization: 12	nated ::
CN for Canada; FN for other foreign jurisdiction)	DE
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D α 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuall photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repothereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION ———	
Failure to file notice in the appropriate states will not result in a loss of the federal ex	xemption. Conversely, failure to file the
appropriate federal notice will not result in a loss of an available state exemption unle filling of a federal notice.	•

 \mathcal{N}

经营业的 医	140 × 1	Frank V	V. BASIC ID	ENŤÚ	FICATION DATA		i i i i	• •	apting and the second
2. Enter the information re	equested for the fol	lowing:							
 Each promoter of t 	he issuer, if the iss	suer has bee	n organized w	ithin (the past five years;				
 Each beneficial ow 	ner having the pow	er to vote or	dispose, or di	rect th	e vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issuer.
• Each executive off	icer and director o	f corporate i	ssuers and of	corpo	rate general and mar	naging	partners of	partne	ership issuers; and
Each general and r	nanaging partner o	f partnershi	issuers.						
Check Box(es) that Apply:	Promoter	Bene	ficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Churchill Holdings, LLC	f individual)								
Business or Residence Addre c/o Waldo's Holdings, LL	•				302				
Check Box(es) that Apply:	Promoter	Z Bene	ficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre		-	-		2				
Check Box(es) that Apply:	Promoter	Z Bene	ficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street, City,	State, Zip Co	ode)	 	-			
420 Decker Drive, Irving,	Irving, Texas 75	5062							
Check Box(es) that Apply:	Promoter	☐ Bene	ficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Scott A. Beck									
Business or Residence Addre			· ·		02				
Check Box(es) that Apply:	Promoter	☐ Bene	ficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, i David Schnabel	f individual)					.,			
Business or Residence Addre 420 Decker Drive, Irving,	(Street, City	State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	☐ Bene	ficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, i Rafael Garza	f individual)								
Business or Residence Addre 201 Main Street., #2001,	•	-	State, Zip Co	ode)				-	
Check Box(es) that Apply:	Promoter	Bene	ficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, i Rodolfo Padilla	f individual)								
Business or Residence Addres Blvd. Adolfo Lopez Mated			-		Gto., MEXICO		·		

	Barran an Arthrid	*** + S&A: BASIC	IDENTIFICATION DATA	* * * * * * * * * * * * * * * * * * *	
2. Enter the information re	quested for the fol	llowing:			
• Each promoter of t	he issuer, if the iss	suer has been organize	ed within the past five years;		
Each beneficial own	ner having the pow	er to vote or dispose, c	or direct the vote or dispositio	n of, 10% or more of	f a class of equity securities of the issuer.
Each executive off	icer and director o	f corporate issuers and	d of corporate general and m	anaging partners of	partnership issuers; and
 Each general and n 	nanaging partner o	f partnership issuers.			•
Check Box(es) that Apply:	Promoter	Beneficial Owr	ner Executive Office	Director	General and/or Managing Partner
Full Name (Last name first, i Alfredo Brenner	f individual)				
Business or Residence Addre 5298 Memorial Drive, Ho	•	Street, City, State, Zi 7007	p Code)	,	
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Office	Director	General and/or Managing Partner
Full Name (Last name first, i Victor Vilaplana	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zi	p Code)		
823 LaJolla Rancho Road					
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Mark Davis	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zi	p Code)		
Palma Real Tower, Suite	15-JK, Calle Ma	idrid No. 2, San Ju	an, PR 00907		
Check Box(es) that Apply:	Promoter	Beneficial Owr	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Troy Wiseman					
Business or Residence Addre 2800 West Higgins Road	•	-	•		
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Office	Director	General and/or Managing Partner
Full Name (Last name first, i L.R. French	f individual)				
Business or Residence Addre 6200 Savoy, #1200, Hou			p Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Office	r Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		1,000		
Business or Residence Addre	ss (Number and	Street, City, State, Zi	p Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Office	r Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zi	p Code)		
	(Use bla	nk sheet or conv and	use additional copies of this	sheet as necessary)
	(030 014	onees, or eopy and	and additional dobles of this	, as necessary,	,

轉達				i degre	B. 1	VFORMAT	ION ABOL	T.OFFERI	NG 🔭			15.00	regerije.
1.	Has the	issuer sold	l, or does th	ne issuer i	ntend to se	ll. to non-a	ccredited i	nvestors in	this offer	ing?		Yes	No 🔀
	Answer also in Appendix, Column 2, if filing under ULOE.									المسا	<u> </u>		
2.										***************************************	s NOI	NE	
	·										Yes	No	
												2	
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	•		first, if indi	vidual)									
			oup, Ltd. *		Samuel Ci	tu Ctata 7	(in Code)						
			Address (N enter, 200				-						
			oker or Dea		ende, Dan	43, 10,43	70201						
Cha	llenger	Capital Gr	oup, Ltd.										
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	•••••				**************	••••••		States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
			first, if indi		d Street, C	ity, State,	Zip Code)					·	
Nam	e of Ass	ociated Br	oker or Dea	aler			·		<u> </u>				
State	e in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
			" or check							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************		States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full	Name (1	Last name	first, if indi	vidual)							-		
Busi	ness or	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)						
Nam	e of Ass	sociated Br	oker or De	aler									
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	•••••	***************************************			,,,	***************************************	☐ All	States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

⁽Use blank sheet, or copy and use additional copies of this sheet, as necessary.)
* Used in connection with Senior Notes offering only.

C. OFFERING PRICE, NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 30,000,000.00	\$ 30,000,000.00
	Equity	30,000,001.20	s 30,000,001.20
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	15	\$ 60,000,001.20
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A	 	\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 150,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		s 150,000.00

	b. Enter the difference between the aggregate offerin and total expenses furnished in response to Part C — Q proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$59.850.001.20
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of t proceeds to the issuer set forth in response to Part C	eed to the issuer used or proposed to be used for purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		*27,020,001
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			
	Purchase of real estate		□\$	\$
	Purchase, rental or leasing and installation of mach and equipment	inery	¬\$	
	Construction or leasing of plant buildings and facili	ities		- □\$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	s or securities of another	□ \$	_ □\$
	Repayment of indebtedness	•	_	
	Working capital			
	Other (specify):			
			□\$. 🗆 \$
	Column Totals		⅓ \$,000,000.	.0 0X \$ 51,850.001.20
	Total Payments Listed (column totals added)		∑ \$59	,850,001.20
		D. FEDERAÉSIGNATURE XII. 7. S. F.		
sigr the	issuer has duly caused this notice to be signed by the u ature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commisedited investor pursuant to paragraph (b)(2) of I	ssion, upon writte Rule 502.	
	er (Print or Type)	Signature Signature	Date September	27,205
		Title of Signer (Print or Type)		
(not Reck	Chairman and CEO		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)